

**REQUEST FOR QUALIFICATIONS
AND
COST PROPOSAL
CLIENT INFORMATION MANAGEMENT SYSTEM
FOR
JEFFERSON COUNTY HUMAN SERVICES
JEFFERSON COUNTY, WISCONSIN**

Response Deadline: SEPTEMBER 5, 2014 – 12:00 Noon

Send all Responses to: Kathi Cauley, Director
Jefferson County Human Services
1541 Annex Rd
Jefferson, WI 53549

Responses received after this date and time will be rejected.

Responses must remain in effect for the life of the contract.

**MARK SEALED ENVELOPE: HUMAN SERVICES CLIENT INFORMATION RECORDS
SYSTEM**

RESPONSE SUBMISSION

Selection of the provider will be the responsibility of Jefferson County. Qualification submissions and cost proposals will be reviewed by a selection workgroup including, but not limited to staff from the Jefferson County Human Services Department, Jefferson County Information Technology Department and Purchasing. The County reserves the right to select one or more organizations that appear best qualified to provide the services desired and then invite those organizations to appear at a designated time and place for an oral presentation and/or interview. The recommendation to award shall be based upon the submission that represents the most advantageous overall response for Jefferson County, all factors considered. In this regard, Jefferson County reserves the right to accept other than the lowest cost proposal and to reject any or all submittals under this RFQ/RFP, if deemed in the best interest of the County.

RIGHTS WITH RESPECT TO QUALIFICATIONS AND COST PROPOSAL SUBMITTALS

The County reserves the right to reject any or all submittals or to waive minor defects or irregularities in the submittal. The County further reserves the right, without prior notice, to supplement, amend or otherwise modify this RFQ/RFP or otherwise request additional information from any or all respondents. By submitting a qualification and cost proposal, the Vendor thereby agrees that the County's decision concerning any submittal in any respect is final, binding and conclusive upon it for all purposes, and acknowledges that the County in its sole and unqualified discretion may waive or deviate from the procedures and/or timetable outlined. All materials submitted become the property of the County and may be available to the public. All costs incurred in connection with responding to the RFQ will be borne by the submitting organization.

PART I – INTRODUCTION / INSTRUCTIONS

The Jefferson County Human Services Department is seeking information and input that will assist the Department in evaluating the replacement of an existing Client Information Management System. The primary goal is to implement a fully integrated Electronic Health Record System for the management, documentation, billing and data mining of consumer services in a county human services environment.

Currently the Human Services Department utilizes CareVoyant Inc. as their Client Information Management System vendor. At present, there are of 80,500 individual consumer records and 253,700 episodes of service. Currently the number of users authorized access to the system is 60, most of these being clerical or financial support staff. The number of users would increase following implementation of a fully integrated Electronic Health Record System which will allow staff to provide direct service to clients.

Respondents must clearly demonstrate specific implementations within the state of Wisconsin and possess expertise, as identified in this Request for Qualifications for each program. After submission, but prior to final selection, vendors wishing to offer a demonstration of their product will have the opportunity to do so on September 8, 2014 in a one hour presentation.

The general objectives related to this project are to:

1. Streamline the workflow within the Human Services Department.
2. Have the ability to maintain a complete Electronic Health Record (EHR).
3. Have the ability to generate billing claims from electronic clinical documentation.
4. Have the ability to track the location of physical records.
5. Have the ability to generate billing invoices and charges for consumers.
6. Have the ability to schedule consumers for appointments with specific internal providers.
7. Acquire the technology and services necessary to improve operating efficiencies and customer service.
8. Obtain a single-source solution with sole accountability being to one vendor.

OBJECTIVES

As a result of this RFP process, it is anticipated that Jefferson County and the selected vendor will be entering into an agreement to acquire and implement the system in cooperation with the Jefferson County Human Services Department and the Jefferson County Information Technology Department. The Human Services Department desires the highest possible level of service, integration and efficiency for the County and consumers. A single-source solution will enable the County to maximize system uptime and reliability, and to safeguard valuable consumer records. The selected system will provide the highest level of efficiency for the Human Services Department.

REQUIRED CRITERIA FOR PROPOSED SOFTWARE

Please Respond to Criteria Below by Placing a (Y) or (N) to the Left of Each Number.
If applicable, please provide a written explanation following the question or on a separate sheet with the question number referenced.

(Y) = System is capable of the desired requirement.

(N) = System is not capable of the desired requirement.

COMPANY EXPERIENCE

1. Explain your experience providing software solutions in the Human Services Industry.
2. Explain your experience in Wisconsin.
3. Explain your ability to offer hosted/cloud service and the advantages and disadvantages compared to self-hosted and pricing.
4. Provide 3 references of counties within the state of Wisconsin with 1 of similar size and identify how many Wisconsin counties you are a vendor for.

DATA MANAGEMENT

5. Describe the ability of your product to modify and create data fields, look-up values and field labels.
6. Describe the capability of your product's compatibility with the State of Wisconsin Encounter System.
7. Does your product record the user ID for each transaction within system?
8. Does your product create custom electronic forms?
9. Does your product store custom electronic forms data?
10. Can your product identify and merge/remove duplicate records?
11. Does your product have batch capability for converting consumer identifiers?
12. Does your product have the following different levels of access?
 - a) View only
 - b) View & print
 - c) View & change/add etc.
 - d) Allow change or deletion of any record with proper authorization
13. Does your product provide different security levels for access?
14. Can your product import data?

RECORDS MANAGEMENT

15. Does your product have the ability to generate and assign an agency defined unique consumer identifier?
16. Does your product have the ability to provide a complete EHR for each consumer?
17. Release of Information.
 - a) Does your product create Release of Information waivers for consumers?
 - b) Does your product have the ability to produce an accounting of disclosures?
 - c) Does your product have the capability to release information electronically?
 - d) Describe your product's ability to redact elements of a consumer record prior to printing.
18. Does your product have the capability to track the location of the consumer's physical chart?
19. Can your product generate color coded bar labels for physical consumer charts?
20. Does your product have batch capability for chart tracking location and updates?
21. Does your product have the capability to scan extraneous material into system and attach to consumer record?
22. Does your product have the capability to flag VIP clients and restrict access.
23. Provide Authentication/Controls.
 - a) Does your product have the ability to create and update sets of access-control permissions granted to users based on the user's role and scope of practice?
 - b) Does your product have the ability to terminate or lock sessions after a series of invalid log-in attempts?
 - c) Can your product inactivate a user and remove their privileges without deleting the user's history?
 - d) Can your product restrict access to patient information based on location?
 - e) Can your product track/audit viewed records without significant effect on system speed?
24. Capability.
 - a) Can your product apply a date and time-stamp each time a note is updated?
 - b) Does your product display and notify the author of pending notes?
 - c) Can your product allow the ability to establish a time frame for pending docs before administrative closing?
25. Ability to amend/correct documentation.
 - a) Does your system provide a clear indicator of a changed record?
 - b) Does your system retain all versions?
 - c) Does your system provide the ability to present the credentials and names of authors?

26. Does your product have the capability for Computerized Physician Order Entry (CPOE)?
27. Customizable Workflow Management.
 - a) Does your system provide the ability to define the records or reports that are considered the formal health record for a specified disclosure?
 - b) Does your system provide the ability to create hard copy and electronic output of report summary information and to generate reports in both chronological and specified elements order?
28. Does your product have the potential for patient portals?
29. Coding/Transaction Standards.
 - a) Does your system support industry standard updates for coding, including both ICD-9-CM and ICD-10-CM?
 - b) Does your system use General Equivalence Mappings between ICD-10 and ICD-9?
 - c) Is your system compliant with Version 5010 transaction standard?
30. Data Retention, Availability and Destruction.
 - a) Does your system provide the ability to store and retrieve health record data and clinical documents for the legally prescribed time or according to organizational policy and to include unaltered inbound data?
 - b) Does your system identify specific EHR data for destruction and allow for the review and confirmation of selected items before destruction occurs?

FINANCIAL MANAGEMENT

31. Does your product have the ability to maintain financial information on consumers?
32. Does your product generate invoices for consumers and track balance owed by that consumer?
33. Describe the ability of your product to generate electronic claims to Medical Assistance (MA), Medicare and private insurers.
34. Describe the capability of your product to track prior authorizations for Medical Assistance (MA).
35. Does your product have the ability to track and manage vendor service authorizations?
36. Can your product manage consumer trust funds or representative payee accounts?
37. Does your product provide utilization data on time utilization of clinical staff?
38. Describe the ability of your product to generate electronic and paper (HCFA 1500) claims to Medical Assistance (MA), Medicare and private insurers for primary,

secondary or tertiary claims.

39. Describe the ability of your system to generate billing statements for consumers that may be financially responsible for either single or multiple clients that receive services.
40. Describe how payments may be posted to a client's account (manually and/or automatically from a 5010 compliant 835 file) and if that information can be exported into a general ledger system.
41. Describe your system's ability to track a worker's time spent for both billable and non-billable time and can this information be used for utilization reports.
42. Does your system have the ability to track multiple payer hierarchy by client?
43. Does your system have the ability to adjust and track either the service provided or payer for a charge on a client's account?
44. Describe the ability of your system to bill either CPT or HCPCS codes (using appropriate modifiers and units) based on the service provided and/or payer of the client.
45. Does your system have the ability to bill multiple services provided to a client as a single service?
46. Describe the ability of your system to track inactive accounts and either write-off balances or flag them for collections.
47. Describe your system's ability to apply a sliding fee scale to a clients account to conform to Wisconsin's Uniform Fee Code.
48. Describe the ability of your system to list charges and receipts in summary or detail for a specific time period by worker, client, payer type, date, or type of service.

CLINICAL MANAGEMENT

49. Can your product track data relating to consumer demographic elements?
50. Can your product track program specific referrals within Department?
51. Can your product track program admission data elements?
52. Can your product track program services provided to consumer?
53. Describe the ability of your product to provide electronic clinical documentation as a legal record and generate billing claims.
54. Does your product have the ability to create electronic referrals to additional Department programs?
55. Is your product certified for meaningful use?

- 56. Does your product track electronic referrals between Department programs per consumer?
- 57. Does your product track outcomes of program services?
- 58. Does your product track outcomes of program admissions?
- 59. Does your product have the ability to track census beds for specific consumers and to track bed status related to a consumer?
- 60. Describe the capability of your product to comprehensively schedule appointments for consumers to program specific services and providers.
- 61. Does your product track and manage consumer medications?
- 62. Does your product provide for 100% time reporting?

SEARCHING

- 63. Completely describe flexibility and functionality of search criteria.

SERVICES AND SOFTWARE

- 64. Describe in detail the support your company offers, including number of employees, hours of operation, etc.
- 65. Describe the update/bug fix process.
- 66. How often do you have new releases of your product?
- 67. What is the process to get customers upgraded?
- 68. Describe the training, installation and conversion process of your product.
- 69. Please make note of any other products/services/software and the associated costs that could be utilized, which have not been mentioned above.
- 70. Describe the minimum system requirements for the server including the minimum Operating System version required, as well as any database software and minimum version required.
- 71. Describe the minimum system requirements for the client including the minimum Operating System version required, as well as later versions that are also acceptable.
- 72. Specify any other third party software that is required for the system to operate, as well as the required version.
- 73. Describe any printable reports that are preloaded with the system, and include samples if possible.

74. Describe the process for creating and running custom reports (if the system is capable).
75. Describe the available software licensing options for the system.

PART II - MINIMUM QUALIFICATIONS AND RESPONSE FORMAT

Respondents' submissions should be formatted in the following fashion with each section tabbed separately. Note specifically if you take exception to any specifications outlined.

SECTION 1: LETTER OF QUALIFICATIONS AND RESPONSE

MINIMUM REQUIREMENTS (#5-7 should not exceed 5 pages)

Minimum requirements for submission include:

1. Table of Contents: Include clear identification of material by section and page number.
2. Cover Letter addressed to Kathi Cauley, Human Services Director.
3. Organization's Name, Address, Telephone Number, Fax Number and Primary Contact.
4. Full disclosure of all lawsuits and claims filed against your organization in the past 24 calendar months.
5. Brief history of the organization including the organization's specific abilities and financial capacity to provide the required professional services and application software.
6. References, including up to three (3) system implementations in Wisconsin, which demonstrate the vendor's competence to perform work similar to that required on this project.
7. A certification shall be provided by the Respondent specifying that the submitted proposal will remain valid from the proposal submission date for a period of 120 days.

SECTION 2: COST PROPOSAL

COST PROPOSAL ITEMS

1. System software cost, detailed by module, if applicable.
2. Professional services cost for implementation, project management, workflow analysis, data and image conversion, and training.
3. Listing of computer hardware requirements for the system (no hardware costs are necessary).
4. Annual system software maintenance costs, projected for 5 years.

PROJECTED TIMETABLE

Issue Request for Qualifications	8/13/14
Inquiries/Questions Submitted	8/20/14
Submittals Due	9/5/14 at or before 12:00 Noon

After all Qualifications have been reviewed, a recommendation will be made to the appropriate County governing committee. Approval by the Jefferson County Board of Supervisors is required prior to Award of Contract. Vendors not involved in the final selection process will be notified in writing. The scheduled date for evaluation and selection is for informational purposes only and is in no way binding upon Jefferson County.

INQUIRIES

All questions concerning this Request for Qualifications and Cost Proposal must be submitted **in writing** to Kathi Cauley, Human Services Director. Questions must be received by **12:00 noon (local time) August 20, 2014**. Questions received after this date and time will not be answered. Questions may be faxed to (920) 674-6113 or e-mailed to kathic@jeffersoncountywi.gov. If necessary, answers to questions will be provided to all specification holders in the form of an addendum. The addendum will include a listing of each of the questions received and Jefferson County's response.

VENDOR SUPPLIED DOCUMENTATION AND MATERIALS

All vendor-supplied materials, including the vendor's response, become the property of Jefferson County. The County will work with vendors to meet their confidentiality requirements, provided that they are within reason and in accordance with applicable state and federal laws, including providing vendors with the opportunity to withdraw from consideration prior to disclosing any materials the vendor deems confidential. All vendor confidential material must have each page clearly marked as confidential. Note, however, that Wisconsin "Open Records Laws" apply, except to the extent that federal law shall supersede.

INSTRUCTIONS FOR SUBMITTAL

Respondents must submit **eight (8) copies** of their response (one original marked as such and seven copies) in a sealed envelope marked Kathi Cauley, Director, Jefferson County Human Services, 1541 Annex Rd, Wisconsin 53549 by **12:00 noon (local time), September 5, 2014**. Any response submitted after this date and time will be rejected. Vendors are responsible for ensuring that the above office receives their response before the deadline. Response "packets" must be clearly labeled with submitting organization's name, return address, proposal title, date, and the name of the organization's primary contact for proposal questions.

PROPOSAL AND PRESENTATION COSTS

Jefferson County will not be liable in any way for any costs incurred by respondents in the presentation of their proposal in response to this RFQ and accompanying fee proposal, nor for the presentation of their proposal and/or participation in any discussions or negotiations.

Elaborate proposals (i.e., expensive artwork) beyond that sufficient to present a complete and effective proposal are not necessary or desired.

REQUEST FOR CLARIFICATION

All requests by Jefferson County for clarification of submissions will be in writing. Such requests shall not alter the respondents pricing information contained in its cost proposal.

TAX REQUIREMENTS

Jefferson County is tax exempt. Jefferson County's tax-exempt number 43233 and FEIN number is 39-6005705. The Vendor is responsible for all taxes and tax reporting.

COMPLIANCE WITH THE REQUEST FOR QUALIFICATIONS

Responses submitted must be in strict compliance with the Request for Qualifications and Cost Proposal. Failure to comply with all provisions on the RFQ may result in disqualification.

IMPLIED REQUIREMENTS

Services and supplies that are not specifically addressed in this Request for Qualifications, but which are necessary to provide functional capabilities proposed by the respondent, must be included in the submission.

NON-DISCRIMINATION

In connection with the performance of work under this contract, the Vendor agrees not to discriminate against any employee or applicant for employment in accordance with all federal, state and local laws. This includes, but is not limited to, discrimination as specified in [s. 111.322](#) Wis. Stats. on the basis of age, race, creed, color, disability, marital status, sex, national origin, ancestry, sexual orientation, arrest record, conviction record, military service, use or nonuse of lawful products off the employer's premises during nonworking hours, or declining to attend a meeting or to participate in any communication about religious matters or political matters as specified in s. 111.321 and 111.31 Wis. Stats., or developmental disability as defined in Wisconsin Statute § 51.01(5)(a). This provision shall include, but not be limited to the following: employment, upgrading, demotion, or transfer; recruitment or recruitment advertising; layoff or termination; rates of pay or other forms of compensation; and selection for training, including apprenticeship. Vendor further agrees to take affirmative action to ensure equal employment opportunities. The Vendor agrees to post in conspicuous places, available for employees and applicants for employment, notices to be provided by the contracting officer setting forth the provisions of the non-discrimination clause (Wisconsin Statutes § 16.765 (2)).

INDEMNIFICATION

The vendor selected to perform services for Jefferson County shall indemnify, hold harmless, and defend Jefferson County, its officers, agents, and employees from any and all liability including claims, demands, losses, costs, damages and expenses of any kind and description or damage to person or property arising out of or in connection with or occurring

during the course of any agreement between the vendor and Jefferson County where such liability is founded upon or grows out of the acts or omissions of any agents or employees of the vendor. In the event that the respondent's proposal results in a contract with Jefferson County, it is understood that the County relies on the Vendor's professional ability, and such is a material inducement to enter into an agreement. The Vendor shall warrant that all its work will be performed in accordance with all generally accepted professional practices and standards, as well as the applicable federal, state, and local laws, it is being understood that acceptance of the Vendor's system by the County shall not operate as a waiver or a release.

AGREEMENT DEVELOPMENT

Jefferson County reserves the right to negotiate with one or more Respondents.

CONTRACT

The documents that will form the contract will include the "Request for Qualifications and Cost Proposal," any attachments or addenda, the successful respondent's "Submission of Qualifications and Cost Proposal," and any subsequent negotiations.

If either party desires to modify the contract, it must give the other written notice of the proposed modification at least 120 days prior to the expiration of the contract. A notice of modification will also be considered a notice of non-renewal of contract. Any acceptance of any modification must be in writing. The Contract may be terminated at any time prior to the end of the Contract period by Jefferson County giving the contractor 120 days written notice of its desire to terminate the Contract.

CONTRACT TERM

The intent of this Request for Qualifications and Cost Proposals is to enter into a five year contract with the option to renew the contract for an additional three, one-year periods, not to exceed a total of eight years.

TERMINATION OF CONTRACT FOR CAUSE

If through any cause, the Vendor shall fail to fulfill in a timely and proper manner the obligations under the contract, or if the Vendor shall violate any of the covenants, agreements or stipulations of the contract, Jefferson County shall thereupon have the right to terminate the Vendor by giving written notice to the Vendor specifying the effective date thereof, at least five (5) days before the effective date of such termination.

Notwithstanding any of the above, the Vendor shall not be relieved of liability to Jefferson County for damages sustained by Jefferson County by virtue of any breach of the contract by the Vendor, and Jefferson County may withhold any payments to the Vendor for the purpose of offset until such time as the exact amount of damages due to Jefferson County from the Vendor is determined.

ASSIGNMENT

The Vendor shall give full attention to the faithful execution of the resulting contract, shall keep the contract under its control, and shall not by power of attorney or otherwise assign the

contract to another party.

VENDOR'S COOPERATION

The Vendor shall maintain frequent and regular communications with Jefferson County and shall actively cooperate in all matters pertaining to the contract.

RESPONSIBILITY

The Vendor shall at all times observe and comply with all federal, state, local and municipal laws, ordinances, rules and regulations in any and all manners affecting and pertaining to the contract and relating to the employment, compensation, and relations with its employees.